## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

109101

| Encouve dandary 1, 2000   |                   |   |                                       |   |                      |                 |             | 1016                  | <u>, 4</u>          | 110                 | <i>!</i>               |
|---|-------------------|---|---------------------------------------|---|----------------------|-----------------|-------------|-----------------------|---------------------|---------------------|------------------------|
|   |                   |   | S FILED - PART I (Column 1) (Col      |   | olumn 2)             | SMALI<br>TYPE   | . EN        | TITY                  | OR                  | OTHER               |                        |
| TOTAL CLAIMS  |                   |   | 15                                    |   |                      | RAT             | E           | FEE                   | 1                   | RATE                | FEE                    |
| FOR   |                   |   |                                       |   | MBER EXTRA           | BASIC           | FEE         | 375.00                | OR                  | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |                   |   | 18 minus 20= *                        |   |                      | X\$ 9           | =           |                       | OR                  | X\$18≈              |                        |
| INDEPENDENT CLAIMS  |                   |   |                                       |   |                      | X42             | =           |                       | OR                  | ' X84=              |                        |
| MULTIPLE DEPENDENT CLAIM P  |                   |   | RESENT                                |   |                      | +140            | =           |                       | OR                  | +280=               |                        |
| * If  | the difference    | in column 1 is                            | less than zero, enter "0" in column 2 |   |                      | TOTA            | الح         | 375                   | OR                  | TOTAL               |                        |
|   | С                 | LAIMS AS A                                | MENDED - PART II                      |   |                      | OTHER THAN      |             |                       |                     |                     |                        |
|   | December 1        | (Column 1)                                | Mary Mary Land Control of the Control | (Column 2)                                  | (Column 3)           | SMA             | LLE         | NTITY                 | OR                  | SMALL               | ENTITY                 |
| AMENDMENT A   |                   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA     | RAT             |             | ADDI-<br>FEE          |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total             | *   | Minus                                 | **  | =                    | X\$ 9           | =           |                       | OR                  | X\$18=              |                        |
|   | Independent       | *<br>INTATION OF M                        | Minus                                 | ***   | =                    | X42:            | -           |                       | OR                  | X84=                |                        |
| 13,16   |                   |   |                                       |   | IVI                  | +140            | =           |                       | OR                  | +280=               |                        |
|   |                   |   |                                       |   | TO                   |                 |             | OR                    | TOTAL<br>ADDIT. FEE |                     |                        |
|   |                   | (Column 1)                                |                                       | (Column 2)                                  | (Column 3)           | ADDIT. F        | CC <b>L</b> | <del></del>           |                     | AUDII. FEE          |                        |
| AMENDMENT B   |                   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT              | RATE            |             | ADDI-<br>FEE          |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total             | *   | Minus                                 | **  | =                    | X\$ 9           | -           |                       | OR                  | X\$18=              |                        |
|   | Independent       | *<br>NTATION OF MI                        | Minus                                 | PENDENT CLAI                                | =<br>M               | X42=            |             |                       | OR                  | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                   |   |                                       |   |                      | +140            | =           |                       | OR                  | +280=               |                        |
|   |                   |   |                                       |   |                      | TO1<br>ADDIT. F |             |                       | OR                  | TOTAL<br>ADDIT. FEE |                        |
| _   |                   | (Column 1)                                |                                       | (Column 2)                                  | (Column 3)           |                 |             |                       |                     |                     |                        |
| AMENDMENT C   |                   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA     | RATE            |             | ADDI-<br>IONAL<br>FEE |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total             | *   | Minus                                 | **  | =                    | X\$ 9:          | -  <br>-    |                       | OR                  | X\$18≈              |                        |
|   | Independent       | *   | Minus                                 | ***   | =                    | X42=            | $\top$      |                       |                     | X84=                |                        |
|   | FIRST PRESE       | NTATION OF MI                             | JLTIPLE DEF                           | PENDENT CLAI                                | М                    | X   E           | -           |                       | OR                  | 7.04=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                   |   |                                       |   |                      |                 |             |                       | OR                  | +280=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                   |   |                                       |   |                      |                 |             |                       |                     |                     |                        |
|   | The ingliest wull | inel Fleviously Pal                       | u FOI (1012101                        | i inaepenaent) is t                         | ine nignest number i | round in the    | appr        | opriate box           | c in col            | umn 1.              |                        |